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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name	of Candidate	(in full)									
	Richa	rd L. Hudson	Jr.									
	(b) Address (number and street)			□С	Check if address changed			Candidate's FEC Identification Number H2NC08185				
	(c) City, S	City, State, and ZIP Code				3. Is This	s Ne	•W		Amended		
	Conc	ord			NC	2802	7-1500	Staten	nent (N)) OR	×	(A)
4.	Party Affil			5. Office Soug	ht		6. State & Dis	trict of Candid	date			
	REPUBL	ICAN PART	Y	House			NC	08				
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)											
	NOTE: This designation should be filed with the appropriate office listed in the instructions.											
	(a) Name	of Committee	(in full)									
	Hudson for Congress											
	(b) Address (number and street) PO Box 5053											
	(c) City, S	tate, and ZIP	Code									
	Con	cord					NC	28027	7-1500			
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)												
	` '		,	oint Fundi	aising R	epreser	ntative)					
	(b) Address (number and street) 222 S Washington Street											
	Suite	115										
	(c) City, S	tate, and ZIP	Code									
	Alex	andria					VA	22314	-3626			
	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	Signature of Candidate Date											
Richard L. Hudson Jr. [Electronically Filed] 09/28/2015												
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.												

FEC FORM 2 (REV. 02/2009)

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F2A Transaction ID :

Form/Schedule: Transaction ID:

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
	F OTHER AUTHORIZED COMMITTEES ding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT candidacy.	T my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE:This designation should be filed with the princi	pal campaign committee.	
(a) Name of Committee (in full)		
NC Freedom Fund		
(b) Address (number and street) 2470 Daniels Bridge Rd		
(c) City, State and ZIP Code		
Athens	GA 30606-6191	
	F OTHER AUTHORIZED COMMITTEES ding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NO candidacy.	T my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the princi	ipal campaign committee.	
(a) Name of Committee (in full)		
NC 4 The Future (Joint Fundraisi	ing Representative)	
(b) Address (number and street) 222 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-3626	
	F OTHER AUTHORIZED COMMITTEES ding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NO candidacy.	T my principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the princi	ipal campaign committee.	
(a) Name of Committee (in full)		
Economic Solutions Victory Fund	d	
(b) Address (number and street) 2470 Daniels Bridge Road Suite 121		
(c) City, State and ZIP Code		
Athens	GA 30606-6191	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 4 / 5
	N OF OTHER AUTHORIZED COMMITTEES Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which candidacy.	is NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE:This designation should be filed with the	principal campaign committee.	
(a) Name of Committee (in full)		
NC Freedom Fund		
(b) Address (number and street) 2470 Daniels Bridge Rd		
(c) City, State and ZIP Code		_
Athens	GA 30606-6191	
	ON OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which candidacy.	is NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the	principal campaign committee.	
(a) Name of Committee (in full)		
Hudson Freedom Fund		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
	N OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which candidacy.	is NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the	principal campaign committee.	
(a) Name of Committee (in full)		
Economic Solutions Victory F	Fund	
(b) Address (number and street) 2470 Daniels Bridge Road Suite 121		
(c) City, State and ZIP Code		
Athens	GA 30606-6191	

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)			Page 5 / 5
	OF OTHER AUTHORIZED COMI uding Joint Fundraising Representatives)		[ADDITIONAL]
I hereby authorize the following named committee, which is Ne candidacy.	OT my principal campaign committee, to receiv	e and expend funds	on behalf of my
NOTE:This designation should be filed with the prin	cipal campaign committee.		
(a) Name of Committee (in full)			
Hudson Freedom Fund			
(b) Address (number and street) 228 S Washington Street Suite 115			
(c) City, State and ZIP Code			
Alexandria	VA	22314-5404	
	OF OTHER AUTHORIZED COM luding Joint Fundraising Representatives		[ADDITIONAL]
I hereby authorize the following named committee, which is N candidacy.	OT my principal campaign committee, to receive	re and expend funds	on behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.		
(a) Name of Committee (in full)			
Americans For BBQ			
(b) Address (number and street) 824 S Milledge Ave Ste 101			
(c) City, State and ZIP Code			
Athens	GA	30605-1332	
	OF OTHER AUTHORIZED COMI		[ADDITIONAL]
I hereby authorize the following named committee, which is N candidacy.	OT my principal campaign committee, to receiv	re and expend funds	on behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.		
(a) Name of Committee (in full)			
(b) Address (number and street)			
(c) City, State and ZIP Code			